

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 19-40658
Chapter 7

Scheherazade, Inc.

Debtor.

**NOTICE OF HEARING AND MOTION OBJECTING TO CLAIM OF
DOUGLAS EDWARDS**

TO: The claimant and other entities specified in Local Rules 9013-3(a) and 3007-1:

1. Nauni Manty, the chapter 7 trustee of the bankruptcy estate of the debtor, moves the court for the relief requested below and gives notice of hearing.

2. The court will hold a hearing on this motion on **Wednesday, February 17, 2021**, at **9:30 a.m.**, before the Honorable Kathleen H. Sanberg, in Courtroom No. 8 West, at the United States Courthouse, at 300 South Fourth Street, in Minneapolis, Minnesota 55415.

3. Any response to this motion must be filed and served not later than **Friday, February 12, 2021** which is five days before the time set for the hearing (including Saturdays, Sundays and holidays). **UNLESS A RESPONSE OPPOSING THE MOTION IS TIMELY FILED, THE COURT MAY GRANT THE MOTION WITHOUT A HEARING.**

4. This court has jurisdiction over this motion pursuant to 28 U.S.C. §§ 157 and 1334, Fed. R. Bankr. P. 5005 and Local Rule 1070-1. The petition commencing this chapter 7 case was filed on March 10, 2019. This proceeding is a core proceeding. This case is now pending before this court.

5. This motion arises under 11 U.S.C. §§ 502, Fed. R. Bankr. P. 3007, 9013 and 9014 and Local Rules 3007-1, 9006-1, 9013-1 and 9013-3.

6. Douglas Edwards filed two claims in this bankruptcy, claim no. 96 which has been amended to a general unsecured claim in the amount of \$75,000 and claim no. 174 in the amount of \$75,180.00. A copy of amended claim no 96 is attached as Exhibit A and a copy of claim no. 174 is attached as Exhibit B.

7. The trustee's office originally corresponded with Mr. Edwards about amending claim no. 96. Instead of amending, Mr. Edwards filed a second claim, claim no. 174. The trustee's office again corresponded with Mr. Edwards about the error and resulting duplicate claim. Mr. Edwards then filed an amendment to claim no. 96.

7. The trustee requests that claim 174 be disallowed as a duplicate of amended claim 96. Note that the trustee has no objection to the amount of \$75,000 for amended claim 96 and believes that claim should be allowed.

WHEREFORE, the trustee requests that claim 174 filed by Douglas Edwards be disallowed.

MANTY & ASSOCIATES, P.A.

Dated: January 14, 2021

/e/ Mary F. Sieling

Nauni Manty (#230352)
Mary F. Sieling (#389893)
150 South Fifth Street, Suite 3125
Minneapolis, MN 55402
Phone: (612) 465-0990
Email: mary@mantylaw.com

Attorneys for the Chapter 7 Trustee

Fill in this information to identify the case:

Debtor 1 Scheherazade, IncDebtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: District of Minnesota

Case number 19-40658

RECEIVED

2020 NOV -2 AM 10:48

U.S. BANKRUPTCY COURT
MINNEAPOLIS, MN

of 53 Send original to:

U.S. Bankruptcy Court
301 U.S. Courthouse
300 South Fourth Street
Minneapolis, MN 55415

Official Form 410

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Douglas Edwards</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Douglas Edwards</u> Name <u>22038 WILD RIDGE ROAD</u> Number Street <u>ALBERT LEA MN 56007</u> City State ZIP Code Contact phone <u>507-291-4474</u> Contact email <u>dougedwardsdc@gmail.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>96</u> <u>AMENDING CLAIM # 96</u> Filed on <u>05/09/2019</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 75,000 Does this amount include interest or other charges?
☒ No
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.
Sold Consignment Jewelry

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ _____

☐ Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/2019 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10/29/2020
MM / DD / YYYY


Signature

Print the name of the person who is completing and signing this claim:

Name Douglas Edwards - JAMES -
First name Middle name Last name

Title _____

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 22038 WILD RIDGE ROAD
Number Street

ALBERT LEA MN 56007
City State ZIP Code

Contact phone 507-291-4474 Email dougedwardsdc@gmail.com

GMAIL.COM

Fill in this information to identify the case:

Debtor 1 Sche herAZADE, INC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of 2020 APR 23 AM 10:25

Case number 19-40658

RECEIVED
U.S. BANKRUPTCY COURT
MINNEAPOLIS, MN

Send original to:
U.S. Bankruptcy Court
301 U.S. Courthouse
300 South Fourth Street
Minneapolis, MN 55415

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?

DOUGLAS J. EDWARDS

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

☒ No☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

DOUGLAS J. EDWARDS

Name

22038 WILD RIDGE ROAD

Number

Street

ALBERT LEA MN 56007

City

State

ZIP Code

Contact phone 507 391 4474

Contact email

dougedwardsdc@gmail.comUniform claim identifier for electronic payments in chapter 13 (if you use one): N/A

Where should payments to the creditor be sent? (if different)

Name

Number

Street

City

State

ZIP Code

Contact phone _____

Contact email _____

4. Does this claim amend one already filed?

☒ No☐ Yes. Claim number on court claims registry (if known) _____

Filed on

MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No☐ Yes. Who made the earlier filing? _____

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

* 7. How much is the claim? \$ 75,180 Does this amount include interest or other charges?
☒ No
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.

He took my deceased wife's jewelry on assignment sold the jewelry and the SOB stole my money "to pay for my son's college!" AND HE KEPT IT

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ No

☐ Yes. Check all that apply:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

☐ Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ _____

\$ 2,850

\$ 12,850

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/2019 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 04/17/2020
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

DOUGLAS
First name

JAMES
Middle name

EDWARDS
Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

22038 WILD RIDGE ROAD
Number Street

ALBERT LEA
City

MN
State

56007
ZIP Code

Contact phone

507 391 4474

Email

dougwardsc@gmail.com

dougwardsc@gmail.com

This is The List of WHAT I brought up.

#1A	\$1200	\$720	#24	\$2000	\$1200
#2A	\$600	\$360	#29	\$1500	\$900
#4A	\$2500	\$1500	#31 (sheet missing)	\$4000	\$2400
#4B	\$1500	\$900	#33	\$8000	\$4800 (Needs Repair)
#5	\$1200	\$720	#35	\$2500	\$1500
#7A	\$6000	\$3600	#36	\$800	\$480
#7B	\$2500	\$1500	#38	\$600	\$360
#8A	\$10,000	\$6,000	#39	\$2500	\$1500
#8B	scrap		#40	\$3000	\$1800
#9	\$800	\$480	#41	\$1000	\$600
#10A	\$2500	\$1500	#42	\$4000	\$2400
#10B	scrap		#43	\$3000	\$1800
#11	\$1500	\$900	#45	\$6000	\$3600
#12	\$3000	\$1800	#46	\$5100	\$3000
#13	\$1000	\$600	#47	\$2500	\$1500
#14B	\$1000	\$600	#48	\$1500	\$900
#16	\$1500	\$900	#49	\$3000	\$1800
#17	\$10,000	\$6000	#51A	\$7400	unknown
#19	\$1200	\$720	#51B	\$2000	\$1200
#20	\$600	\$360	#51C	\$600	\$360
#21	\$8000	\$4800	#52	no sheet	
#22	\$6000	\$3600	#53	\$8000	\$4800
#23	\$1200	\$720	Totals	\$132,800	\$75,180

RETAIL

WHAT # DO YOU WANT ?? my 0%

Scheherazade Consignment Merchandise Form

#1A

Consignor Information:

Name: Douglas Edwards Home # 507-377-0590
Phone(s): Cell # 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 1 Bky Mosaic Pendant
w/ Black
coral

*Very small amount of Mosaic missing on outer edge

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1200

Customer: \$ 900 Scheherazade: \$ 600

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123721 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#2A

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
 Address: 22038 Wildridge Road, Albert Lea, MN 56007 Phone(s): Cell# 507-291-4474

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Dia Earrings w/Omega Backs
14k
150ctw Approx

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 600-

Customer: \$ 360.00 Scheherazade: \$ 240.00

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # _____ Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
Address: 22038 Wildridge Road, Albert Lea, MN 56007 Phone(s): cell# 507-291-4474
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Pendant
w/ 1.5ctw mox

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2500 -
Customer: \$ 1,500 - Scheherazade: \$ 1,000 -
If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off
Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123718 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

*Contact for Offers Document Page 1 of 1 Lisa Zacharias # 4B

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
 Phone(s): Cell# 507-291-4474
 Address: 22038 Wildridge Road, Albert Lea, MN 56007
 Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Emerald - Diamond Pendant
Platinum
w/ Accent diamonds

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1500 -
 Customer: \$ 900 - Scheherazade: \$ 600 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
 Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123717 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

Consignor Information: Home# 507-377-0590
Name: Douglas Edwards Phone(s): Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: Other Contact Information:

Description of Consigned Item per Consignor (One item per Form): Ruby (oval) Ring 14K-g

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1200 -
Customer: \$ 700 - Scheherazade: \$ 480 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off
Customer: \$ Scheherazade: \$

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:
(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature] Scheherazade Authorized Signature
Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # CAMS # 123744 Price Sold For \$

Returned to Consignor Date: ___/___/___ Consignor Signature for Return:

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474

Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Diamond + Ruby Pendant
Platinum
Over 2.0ctw

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 6000

Customer: \$ 3600 Scheherazade: \$ 2400

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123713 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others

Document 18 Page 8 of 53

Lisa Zacharias 7B

Scheherazade Consignment Merchandise Form

#7B

Consignor Information:Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wilbridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Diamond Pendant
over 1.5ctwValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 3,000

Customer: \$ 1,800 Scheherazade: \$ _____

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123712 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

*Contact for offers Document 1-1 Filed 01/14/15 Page 1 of 1 Lisa Zacharias #8A 8

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
 Address: 22038 Wildridge Road, Albert Lea, MN 56007 Cell# 507-291-4474
 Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Diamond Bracelet
W/ 95 Round diamonds @ 6.5 ctw
14kw Approx

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 10,000

Customer: \$ 6000 Scheherazade: \$ 4000

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
 Scheherazade Authorized Signature

By: [Signature]
 Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123714 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#9

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Victorian Inlaid
Floral Bracelet
Gold Filled

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 800
Customer: \$ 480 Scheherazade: \$ 320

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123711 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

*Contact for Offers 607-418-8603 Lisa Zacharias #10

Scheherazade Consignment Merchandise Form #10A

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
 Address: 22038 Wildridge Road, Albert Lea, MN 56007 Cell# 507-291-4474
 Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Omega Necklace
w/ Seven Round Diamond
1.0ctw Approx

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2,500 -
 Customer: \$ 1500 - Scheherazade: \$ 1000

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
 Scheherazade Authorized Signature

Consignor Signature: [Signature]
 I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123724 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#11

Consignor Information: Home# 507-377-0590
Name: Douglas Edwards Phone(s): Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: Other Contact Information:

Description of Consigned Item per Consignor (One item per Form): 1BK two-tone Ring w/ Synthetic Center Stone

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,500 -
Customer: \$ 900 - Scheherazade: \$ 600 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off.
Customer: \$ Scheherazade: \$

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:
(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature] Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # CAMS # 123679 Price Sold For \$

Returned to Consignor Date: ___/___/___ Consignor Signature for Return:

Scheherazade Consignment Merchandise Form

#12

Consignor Information:
Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Ruby + Dis Ring
Platinum
Center Dia Approx .40ct

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 3,000

Customer: \$ 1,800 Scheherazade: \$ 1,200

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature] Scheherazade Authorized Signature
[Signature] Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123673 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#13

Consignor Information: Name: Douglas Edwards Address: 22038 Wildridge Road, Albert Lea, MN 56007 Phone(s): Home# 507-377-0590 Cell# 507-291-4474 Email: Other Contact Information:

Description of Consigned Item per Consignor (One item per Form): 14Kg Avantgarde Ring w/ Synthetic Stones

Value of Consigned Item per Consignor (what is item insured for?): N/A

- Consignment Program Terms:
- 1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.
 - 2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.
- NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,000

Customer: \$ 600 Scheherazade: \$ 400

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ Scheherazade: \$

- 4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.
- 5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with: (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

Sy: [Signature] Scheherazade Authorized Signature Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: / / Receipt # CAMS # 123674 Price Sold For \$

Returned to Consignor Date: / / Consignor Signature for Return:

Scheherazade Consignment Merchandise Form

#14B

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
 Address: 22038 Wildbridge Road, Albert Lea, MN 56007 Phone(s): Cell# 507-291-4474
 Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Inlaid Brook
Dove Motif
18K y

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,000.00

Customer: \$ 600.00 Scheherazade: \$ 400.00

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
 Scheherazade Authorized Signature

Consignor Signature: [Signature]
 I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123674 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

116

Consignor Information:
Name: Douglas Edwards Phone(s): Home# 507-377-0590
Address: 22038 Wildbridge Road, Albert Lea, MN 56007 Cell# 507-291-4474
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Emerald + Dig
Platinum Antique Ring
(Emerald is abraded but could be polished for \$20-30)

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,500 -

Customer: \$ 900 - Scheherazade: \$ 600 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

by: [Signature] [Signature]

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123678 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#17

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Antique Diamond + Sapphire
Ring Platinum
Center is Approx 1.65 ct Euro Dia

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 10,000 -

Customer: \$ 6,000 - Scheherazade: \$ 4,000 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123664 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for Offers

Document 18-1 Filed 01/14/18 Page 1 of 1

Lisa Zacharias #19

Scheherazade Consignment Merchandise Form

#19

Consignor Information:Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Fantasy Cut Blue TopazPendant w/ DiasDias = .23 ctw Approx14ktgValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,200 -

Customer: \$ 720 - Scheherazade: \$ 480 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: Lisa Zacharias
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123729 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for others

Document 18-1 Filed 01/14/15

Lisa Zacharias #20

Scheherazade Consignment Merchandise Form

#20

Consignor Information:Name: Douglas EdwardsHome# 507-377-0590
Phone(s): cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 12K Locket Victorian
W/ Chain
W/ Pearls
*Clasp wornValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 600

Customer: \$ 360 Scheherazade: \$ 240

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123730 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#21

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Sapp + Orig Ring
Antique Platinum
Sapp approx 1.35 + 1.34 ct ea.
SOcted Dras

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 8000 -

Customer: \$ 4,000 - Scheherazade: \$ 3,200 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123667 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for others Document 178 Page 29 of 53 Lisa Zacharias #22

Scheherazade Consignment Merchandise Form

#22

Consignor Information:Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Diamond Brace
Antique
1.24 ctw ApproxValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 6000

Customer: \$ 3000 Scheherazade: \$ 2400

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123731 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others

Document 1-1 Filed 01/14/21 Page 1 of 1

Lisa Zacharias 23

Scheherazade Consignment Merchandise Form

#23

Consignor Information:Name: Douglas Edwards Phone(s): Home # 507-377-0590 Cell # 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Antique Cameo
14K LG
.10ctw Rose cut DiamondValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1200Customer: \$ 720 Scheherazade: \$ 480If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.By: [Signature]
Scheherazade Authorized SignatureConsignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.Date Sold: ___/___/___ Receipt # _____ CAMS # 123732 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

*Contact for others Document 178-1 Filed 01/14/14 Page 1 of 1 Lisa Zacharias #24

Scheherazade Consignment Merchandise Form

24

Consignor Information:Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 1 piece Vintage necklace
70ctw ApproxValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2,000

Customer: \$ 1200 Scheherazade: \$ 800

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123733 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for others Document 18-1 Filed 01/14/14 Page 2 of 5 Lisa Zacharias #29

Scheherazade Consignment Merchandise Form

#29

Consignor Information:Name: Douglas Edwards Home# 507-377-0590 Phone(s): Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Grand Perregaux
Vintage Platinum Watch
w/ Diamonds & Sapphires
* may need about (\$12,250)Value of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1500

Customer: \$ 900 Scheherazade: \$ 600

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123738 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
Phone(s): cell# 507-291-4474

Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Diamond + Sapphire
Bracelet

* needs minor work around Sapp
Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months.
Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 8,000 -

Customer: \$ 4,000 - Scheherazade: \$ _____

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123665 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others Document 1-1 Filed 01/14/14 Page 1 of 1 Lisa Zacharias 35

Scheherazade Consignment Merchandise Form

#35

Consignor Information:Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 18K Antique
pendant/still created
out at ring
2.90000 Based on formal AppraisValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 3500Customer: \$ 1500 Scheherazade: \$ 1000If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123741 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others Oct 17 8:00 Lisa Zacharias #36

Scheherazade Consignment Merchandise Form

#36

Consignor Information:Name: Douglas Edwards

Phone(s):

Home# 507-377-0590Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____

Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 15k Antique Etruscan Sy
carving w/ PearlsValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 600

Customer: \$ 400 Scheherazade: \$ 320

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123742 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for others Document 178 Page 36 of 53 Lisa Zacharias #38

Scheherazade Consignment Merchandise Form

#38

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474

Address: 22038 Wildbridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): How Memorial Bracelet

18K Y
of Silver to flip
Victorian

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 600

Customer: \$ 360 Scheherazade: \$ 240

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 12325 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#39

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildbridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum + Dia Watch
aprox 1.0ctw in Dia
wind up.
* may need overhaul (Aprox \$150)

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2,500 -

Customer: \$ 1,500 - Scheherazade: \$ 1,000 -

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123666 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for Offers Document 1-1 Filed 01/14/14 Page 1 of 1 Lisa Zacharias #40

Scheherazade Consignment Merchandise Form

#40

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474

Address: 22038 Wildbridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 60" chain (10x)

w/ photo lock - back

14k-g

Circa 1860

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 3000 -

Customer: \$ 1800 - Scheherazade: \$ 1200

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123745 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others

Document 178 Page 34 of 53

Lisa Zacharias

#41

#41

Scheherazade Consignment Merchandise Form**Consignor Information:**Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Ruby - D's Crown Neck Earring14K RoseDia's - 22038 Albert LeaValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1,000 -

Customer: \$ 600 - Scheherazade: \$ 400

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123726 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#42

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Antique Ring
w/ Diamonds
1.80ctw ApproxValue of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 4000 -

Customer: \$ 2400 - Scheherazade: \$ 1600

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____. (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123669 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others Document 178-3003 Lisa Zacharias 43

Scheherazade Consignment Merchandise Form

#43

Consignor Information:Name: Douglas Edwards Phone(s): Home # 507-377-0590 Cell # 507-291-4474Address: 22038 Wildbridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 1800 VictorianMarble12 inch Apron1800'sValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1800

Customer: \$ 1800 Scheherazade: \$ 1200

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123727 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: 1

*Contact for others Document 178-1 Lisa Zacharias #45
#45

Scheherazade Consignment Merchandise Form

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
 Address: 22038 Wildridge Road, Albert Lea, MN 56007 Phone(s): cell# 507-291-4474
 Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Early 1800's French Camee
Sardonyx w/ rose cut diamonds

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 6,000.00

Customer: \$ 3,600.00 Scheherazade: \$ 2,400.00

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

 (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123123 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#46

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Gilson Lab Created Emerald
w/ 1.21ct Baguette Dia's
+ 1.60ct Round Diamonds
Platinum

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 5,000
Customer: \$ 3000 Scheherazade: \$ 2000

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123672 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

*Contact for others

Document 1-1 Filed 01/14/14 Page 1 of 1

Lisa Zacharias

Scheherazade Consignment Merchandise Form

#47

#47

Consignor Information:Name: Douglas EdwardsHome# 507-377-0590
Phone(s): Cell# 507-291-4474Address: 22038 Wildbridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): S.S. w/ hand layered inner
Rough cut diamonds in bezels
and throughout ring.Value of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2500

Customer: \$ 1500 Scheherazade: \$ 1000

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: _____

Scheherazade Authorized Signature

Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123719 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for offers Document 178 Page 48 of 53 Lisa Zacharias

48

Scheherazade Consignment Merchandise Form

#48

Consignor Information:Name: Douglas EdwardsHome# 507-377-0590
Phone(s): cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): 14K + S-S Ring
w/ Blue Topaz and
rough cut diamondsValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 1500Customer: \$ 900 Scheherazade: \$ 600If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.By: [Signature]
Scheherazade Authorized SignatureConsignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.Date Sold: ___/___/___ Receipt # _____ CAMS # 123722 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#49

Consignor Information:

Name: Douglas Edwards Home# 507-377-0590
Address: 22038 Wildridge Road, Albert Lea, MN 56007 Phone(s): Cell# 507-291-4474
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Diamond Ring
Antique
Approx. 50ct Center

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.
2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 3,000-
Customer: \$ 1,800- Scheherazade: \$ 1,200
If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off
Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:
_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature] [Signature]
Scheherazade Authorized Signature Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123675 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____ Consignor Signature for Return: _____

*Contact for others Document 1-1 Filed 01/14/21 Page 1 of 1 Lisa Zacharias #51A

Scheherazade Consignment Merchandise Form

#51A

Diamonds

Consignor Information:Name: Douglas Edwards

Phone(s):

Home# 507-377-0590Cell# 507-291-4474Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): (1) 2.0ct Aprox(1) 1.18ct Euro(1) 1.22ct EuroValue of Consigned Item per Consignor (what is item insured for?): N/A**Consignment Program Terms:**

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold. & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day wait consignor. Your share of the selling price is 60% of the day of the sale.

Sold wholesale

3. For the item covered by this Agreement, you

Customer: \$ \$7400

If Scheherazade receives an offer for your item, you authorize Scheherazade to accept if \$ _____

Customer: \$ _____

4. You agree that Scheherazade, in our sole discretion, may participate in certain promotions, events, etc.

5. You represent, & intend for Scheherazade to represent, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

Consignor Signature: [Signature]
I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ____/____/____ Receipt # _____ CAMS # 123709 Price Sold For \$ _____

Returned to Consignor Date: ____/____/____

Consignor Signature for Return: _____

*Contact for others Document 1-1 Filed 01/14/14 Page 1 of 1 Lisa Zacharias #511

Scheherazade Consignment Merchandise Form

51 B

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590 Cell# 507-291-4474

Address: 22038 Wildridge Road, Albert Lea, MN 56007

Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): J.B. Star Design (Beverly Hills)
Diamond Band

Marquise Baguette
Approx 2.0ctw 18K + Platinum

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 2000

Customer: \$ 1200 Scheherazade: \$ 800

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

_____ (Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

[Signature]
Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123710 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#51C

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
Address: 22038 Wildridge Road, Albert Lea, MN 56007 Cell# 507-291-4474
Email: _____ Other Contact Information: _____
Description of Consigned Item per Consignor (One item per Form): 5 Stone Band
46

Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 600

Customer: \$ 300 Scheherazade: \$ 240

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature]
Scheherazade Authorized Signature

[Signature]
Consignor Signature: I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # _____ Price Sold For \$ _____

Returned to Consignor Date: ___/___/___

Consignor Signature for Return: _____

Scheherazade Consignment Merchandise Form

#53

Consignor Information:

Name: Douglas Edwards Phone(s): Home# 507-377-0590
cell# 507-291-4474
Address: 22038 Wildridge Road, Albert Lea, MN 56007
Email: _____ Other Contact Information: _____

Description of Consigned Item per Consignor (One item per Form): Platinum Diamond + Sapphire
Bracelet

* needs minor work around Sapp
Value of Consigned Item per Consignor (what is item insured for?): N/A

Consignment Program Terms:

1. Consignor (hereafter referred to as You) agree to leave your item on consignment for a minimum of 6 months. Also, this item will not be cross-marketed (i.e. eBay), etc. by the consignor or an agent during this time period.

2. You will receive 60% of the price for which the item is sold, & Scheherazade will receive 40%.

NOTE: Scheherazade has a 90 day waiting period between the sale of your item & payment to the consignor. Your share of the selling price will be paid approximately 91 days after the day of the sale.

3. For the item covered by this Agreement, you have authorized a Tag/Selling price of \$ 8,000 -

Customer: \$ 4,000 - Scheherazade: \$ _____

If Scheherazade receives an offer for your item which is below the above Tag price, the lowest selling price you authorize Scheherazade to accept is \$ 10% off

Customer: \$ _____ Scheherazade: \$ _____

4. You agree that Scheherazade, in our sole discretion, reserves the right not to display consignment items during certain promotions, events, etc.

5. You represent, & intend for Scheherazade to rely on the representation, that on the consigned item you currently own, & during the term of the consignment you will maintain primary insurance for the item with:

(Name of Ins. Co.; a Certificate of Insurance is appreciated).

Agreed & signed, this 2nd day of May, 2017 at Edina, MN 55435.

By: [Signature] Scheherazade Authorized Signature
[Signature] Consignor Signature

I certify under penalty of perjury that to my knowledge the information above is true & complete, & I am the owner, or have authority of the owner, to sell or pledge the property.

Date Sold: ___/___/___ Receipt # _____ CAMS # 123665 Price Sold For \$ _____

Returned to Consignor Date: ___/___/___ Consignor Signature for Return: _____

VERIFICATION

I, Nauri Manty, the trustee and movant named in the foregoing notice of hearing and motion, declare under penalty of perjury that the facts contained in the foregoing motion are true and correct to the best of my knowledge, information and belief.

Dated: January 14, 2021



Nauri Manty, Trustee

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 19-40658
Chapter 7

Scheherazade, Inc,

Debtor.

UNSWORN CERTIFICATE OF SERVICE

I declare under penalty of perjury that on January 14, 2021, I caused copies of the following documents to be filed electronically with the Clerk of Court through ECF, and that ECF will send an e-notice of the electronic filing to the ECF participants:

**Notice of Hearing and Motion Objecting to Claim of Douglas Edwards, Verification,
Proposed Order and this Unsworn Certificate of Service,**

I further declare that I caused copies of the foregoing documents to be mailed by first class mail, postage prepaid, to the following non-ECF participants:

Douglas Edwards
22038 Wildridge Rd
Albert Lee, MN 56007

Scheherazade, Inc.
ATTN: Officer, Director, or Service Agent
3181 W 69th St
Edina, MN 55435

Robert K Dakis
Morrison Cohen, LLP
909 Third Ave
New York, NY 10022

David J Kozlowski
Morrison Cohen, LLP
909 Third Ave
New York, NY 10022

Joseph T Moldovan
Morrison Cohen, LLP
909 Third Ave
New York, NY 10022

Wells Fargo Vendor Financial Serv, LLC fka
GE Gapital Information Tech Solutions
c/o a Ricoh USA Program fdba Ikon Financ
PO Box 13708
Macon, GA 31208-3708

Dated: January 14, 2021

/e/ Erica L. Miller
Erica L. Miller, Paralegal
Manty & Associates, P.A.
150 South Fifth Street, Suite 3125
Minneapolis, MN 55402

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 19-40658
Chapter 7

Scheherazade, Inc,

Debtor.

ORDER

This matter came on before this court on the motion of the chapter 7 trustee objecting to claim no. 174 filed by Douglas Edwards, because such claim is a duplicate of claim no. 96. Based upon the files, records and proceedings herein,

IT IS ORDERED: that the trustee's objection to the claim no. 174 is sustained and the claim is disallowed.

Dated:

Kathleen H. Sanberg
United States Bankruptcy Judge